2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009906

Entity Name: NUCHIM FOUNDATION CORP.

FILED Feb 29, 2012 Secretary of State

Current Principal Place of Business:

18001 OLD CUTLER RD., SUITE 450 18001 OLD CUTLER RD.

VILLAGE OF PALMETTO BAY, FL 33157 SUITE 401

VILLAGE OF PALMETTO BAY, FL 33157

New Principal Place of Business:

Current Mailing Address: New Mailing Address:

18001 OLD CUTLER RD. 18001 OLD CUTLER RD., SUITE 450

VILLAGE OF PALMETTO BAY, FL 33157 SUITE 401

VILLAGE OF PALMETTO BAY, FL 33157

FEI Number: 51-0615943 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RAPAPORT, CARLOS RAPAPORT, CARLOS

18001 OLD CUTLER RD., SUITE 450 18001 OLD CUTLER RD., SUITE 401

US VILLAGE OF PALMETTO BAY, FL 33157 VILLAGE OF PALMETTO BAY, FL 33157 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 02/29/2012

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

RAPAPORT, CARLOS Name:

Address: 18001 OLD CUTLER RD. SUITE 401

City-St-Zip: PALMETTO BAY, FL 33157

Title:

Name: RAPAPORT, GUILLERMO

Address: 18001 OLD CUTLER RD. SUITE 401

City-St-Zip: PALMETTO BAY, FL 33157

Title: DIR

RAPAPORT, HENRY Name:

18001 OLD CUTLER RD. SUITE 401 Address:

City-St-Zip: PALMETTO BAY, FL 33157

Title: DIR

Name: RAPAPORT, RICHARD

18001 OLD CUTLER RD. SUITE 401 Address:

City-St-Zip: PALMETTO BAY, FL 33157

Title: DIR

RAPAPORT, ROBERT Name:

18001 OLD CUTLER RD. SUITE 401 Address:

City-St-Zip: PALMETTO BAY, FL 33157

Title:

REBELO, JOSE C Name:

Address: 18001 OLD CUTLER RD. SUITE 401 PALMETTO BAY, FL 33157 City-St-Zip:

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HENRY RAPAPORT DIR 02/29/2012